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Original Articles.

THE TREATMENT AND CURE OF LEPRA TUBEROSA WITH EUROPHEN.

By DR. JULIUS GOLDSCHMIDT, Madeira.

(Reprinted from the Therapeutische Monatshefte April
1893.)

The attempts to institute a rational treatment of leprosy by internal or external remedies, have been characterised thus far by so unsatisfactory results, that most physicians practising in countries in which leprosy prevails have come to regard all therapeutic measures under the conditions hitherto existing as hopeless. On the other hand we observe in the unimpeded course of this disease certain circumstances which should constantly impel us anew to a judicious effort to influence single symptoms if not the entire disease. These circumstances are the arrest in the development of the cutaneous thickening, continuing for many months and even years, or the complete remission in the appearance of new eruptions, for a long period, or the atrophy of the nodules (attended of course with the pronounced destruction of large areas of tissue), the extraordi-

nary resistance to the disease manifested by the organism or some of its parts, such as the scalp the extensor surface of the extremities; further, that the observation that this affection never appears as an acute one, but that the affected areas are only the seat of an acute inflammation; and finally the therapeutic experience which I was the first to make with tuberculin,* that it exerts a specific influence upon the nodules but unfortunately only causes a temporary retrogression. All these facts urgently impel to new therapeutic experiments. In estimating the results obtained from the treatment of leprosy, we must of course be reserved, for as already mentioned a remission of long duration is frequently followed by a paroxysmal sudden further development of the affection. During a period of many months I have measured certain nodules and patches in the most accurate manner, without detecting even the slightest difference in size; until sud-

*All my cases treated. with tuberculin [see my article on "Leprosy and Madeira, 1891, F. C. W. Vogel, Leipzig], became worse soon after initiation of this treatment. In the case of a child ten years old a real facies leonina had developed from the isolated patches in less than two years. This is the more remarkable since prior to puberty the course of leprosy is usually very chronic.

only without any external influence they began to grow, and within three to four weeks had attained to double their previous dimensions; or in the same inexplicable manner new foci developed at a greater or less distance. This observation was confirmed by means of photography, which permits an accurate measurement of the projected nodules. Indeed one finally reaches the conclusion that leprosy produces local foci at some orifice on the skin or a mucous membrane (nose). These spread slowly along certain routes, avoiding as long as possible the regions of the body where the skin is tense (such as the skull and the extensor surface of the extremities). This pronounced tendency to commence as a local affection and to remain local during its entire course extending over many years, and even decades, is an important indication of the possibility of influencing and even curing the disease by local means. I have never observed an acute leprosy resembling an acute miliary tuberculosis or an acute disease produced by absorption of the metabolic products of the bacilli. Every focus undergoes its own process of evolution. Death is brought about by the complications and scarcely ever by the disease per se, since the vital organs are seldom attacked or only at a late period. Whether the chronic pulmonary phthisis so frequently observed at least in Madeira is of leprosy or tuberculous character I will not attempt to decide.

In view of this position of clinical observation, the idea suggested itself to extirpate the isolated nodules at the beginning of the disease and in this way to arrest the spread of the infection. The total extirpation of small nodules is unattended with difficulties; the wound cicatrized rapidly and no appearances of leprosy manifest themselves at this place for a long time, until finally new eruptions develop around the scar or in its vicinity. Long before surgical treatment was resorted to it had been customary to employ local measures, consisting, inunctions of various substances; among which chaulmoogra oil enjoyed the best reputation. As a rule, however, other remedies were administered internally at the same time. All such experiments I made during a long series of years, without any real or permanent results. For this

reason I have sought to find a new remedy and a new method of treatment.

Among all the local remedies employed against the tubercle bacillus, which is so closely related to the organism of leprosy, iodoform has probably given the most satisfactory results in tuberculosis of the joints, bones and glands. Its employment in leprosy commended itself for many obvious reasons. I was soon compelled however to refrain from its use on account of the general disturbance it occasioned, such as elevations of temperature, which became dangerous on account of the wretched and feeble condition of the patient. Europhen (I am greatly indebted to the Farbenfabriken Vorm. Friedr. Bayer & Co., Elberfeld, who placed the remedy at my disposal. A quite extensive literature exists relative to the chemical constitution and therapy of the remedy, in most of which a favorable opinion is expressed), appeared to me to be a harmless substitute, rich in iodine (28 per cent), which probably is the sole effective element, and in my further experiments I made use exclusively of europhen. My observations were made in five cases and extended in four over a period of eight months, and in one case (which was cured) over fifteen months. The remedy was employed to the exclusion of all other measures while the patient's manner of life remained unchanged.

I first treated advanced cases of *Leprosy Tuberosa*, in order to form an idea of the manner of application of the remedy and the action on certain nodules or diffuse thickenings. If a pronounced effect followed then the treatment must be energetic; either by continuous application of europhen both during day and night, or by the introduction of the remedy into the nodule itself. In experimenting with injections of the remedy, I was actuated by the thought that it might be possible to effect an immediate curative result, and at the same time I tried to increase the tension within the nodules to a maximum; for as already mentioned, where the skin is tightly stretched regions remain intact as a rule, or at least for a long time; and one also observes an involution of the tumors as soon as they have attained a certain degree of development, and consequently a certain degree

of hardness. In order to convince myself of the innocuous character of the remedy, I employed at first a few subcutaneous injections of a three per cent solution in oil; which were well borne in amounts of one centimetre (a syringeful), without producing a local or general reaction. The strength of the solution was gradually increased to 5 per cent.

Case 1. Alexandria Rosas, aged forty-eight, coming from one of the villages of the Southern Coast. Parents are not leprosy; a sister, a male and female cousin had died of leprosy. The patient is married and had eight children, two of which are still alive and not leprosy. She had lived thirty years in Demerara, British Guyana, has been sick seven years and returned to her native place three years ago. The disease has invaded almost the entire cutaneous surface and the mucous membrane of the pharynx and larynx. A five per cent solution of eucalyptol in oil, was injected into the degenerated skin of the arm at different places. No improvement was noted at the end of three weeks. The leprosy infiltrations opposed a considerable resistance to the injections, which for this reason could be practised only slowly, drop by drop, at various places until the skin became tense and further introduction was impossible. The absorption of the oil requires at the very least three days, and sometimes eight days, and on this account a number of infiltrated patches not too far removed from each other were subjected to this proceeding. Owing to the incredulity which the patient manifested toward any kind of interference, the treatment was suspended at the end of three weeks. The leprosy lesions were not affected in any manner. I would remark here that no formation of abscesses occurred in this case or in any of the other cases; of course all the injections were made under aseptic rules.

Case 2. Pedro Peleiro (see illustration and history in the article on "Lepra in Madeira" already referred to). This far advanced case will only serve to emphasize the harmless character of this treatment. After it had been kept up for seven months the proceeding was discontinued. Several of the nodules had become flatter, but at the present time, almost a year after the commencement of

the treatment, a change for the worse has manifested itself.

An attempt now was made to select cases in which the nodules were sharply circumscribed and to continue our further experiments on these.

Case 3. Silva, aged nineteen years, coming from the northern part of the island. Had been sick eight years. Father died of leprosy. *Facies leonina* present. On the extremities circumscribed nodules, chiefly isolated, varying in size up to a pigeon's egg. Over each olecranon isolated tumors of the size of a cherry which seemed especially adapted for the experiment. These nodules were injected as frequently as possible, usually every third day, with the largest possible quantity of eucalyptol oil, five per cent. At the close of the small operation the originally doughy nodules felt hard and tense. After six months of treatment the nodules had decreased to one third of their original size. At the present time, eight months later, the nodules have not enlarged, though the disease has slowly advanced.

Case 4. Isabel Gonsalves Serras, aged twelve years, coming from the western part of the island (see page 1. c. 2). In this case there ensued after the tuberculin treatment, which at that time was not followed by visible results whether favorable or unfavorable, a subacute exacerbation such as I have observed only at the time of puberty; which in these mentally and physically backward children is much delayed. At first subcutaneous injections in the vicinity of the affected areas of the skin were tried for six weeks, but without success. Later the nodules were treated as in case 3, the treatment being continued for five months. The nodules slowly decreased in circumference and at the close of the treatment were of about one-half of their original size. The disease however progressed rapidly, so that after six months the nodules treated on the arms and legs had attained their previous size.

Case 5. Maria Julia (illustration and history 1. c.) The disease was characterized by the formation of nodules on the left side of the mouth, the left upper lip, the chin, the right eyelid, the point of the nose, and on the right upper and lower extremity. To secure as lengthy

and uninterrupted treatment as possible, the injections were discarded, and after about fifteen months I began to treat the degenerated leprous patches and their vicinity with inunctions of five per cent. euophen oil thrice daily. All the thickened and suspicious areas of skin were gently rubbed with oil for a period of five minutes. Any oil remaining on the skin after the inunction was not removed, so that the parts were kept in contact with the remedy day and night. It (euophen oil) was also introduced into the nose three times daily. The patient continued the treatment conscientiously for ten months, interrupting it during the latter part of her pregnancy and the four weeks following the birth of her child which was vigorous and healthy. The result of this treatment was truly astonishing, although I had been previously acquainted with the action of euophen in weakening if not totally destroying the bacilli. As early as four weeks after the application a decided improvement could be noted; the swollen upper lip and the thickened eyelid diminished in size, the intense redness subsided and the patient could open her mouth more readily and widely, and pucker her lips more tightly. The affected patches of the skin on the extremities all showed signs of improvement. Without entering into the details of the slow but steady progress toward recovery, I will only report the ultimate result of fifteen months treatment. The eyelids are perfectly normal, so that the original site of the disease can no longer be detected. The large leprous area on the upper lip and angle of the mouth, and the smaller one on the chin are completely cured; the skin can be lifted up in folds; is of a light brownish hue and somewhat depressed toward the periphery; bacilli can no longer be detected in it. The point of the nose alone is still somewhat swollen and reddened; here also no bacilli are present. The leprosy of the lower extremities has been perfectly cured; at the former situation of the disease the skin is of a brownish color, but feels healthy and contains no bacilli. The general condition of the woman is excellent, and was never disturbed during the long course of treatment.

I will, nevertheless continue the treat-

ment for an indefinite period. At any rate, a sufficiently long time had elapsed to warrant me in regarding this case, whose constant advance I had observed for a number of years, as influenced therapeutically or even cured by this remedy. During a period of twenty-five years observation of leprosy such a result, such a decided cure, has never occurred, notwithstanding all the pains and care I have taken in the treatment. Indeed I would say that a case in which a cure has been affected has never come to my knowledge.

Accordingly, this case, although an isolated example, seems to urgently demand us to use the same remedy and the same method in other cases, the more so since the injections into the nodules also exerted a distinctly favorable effect. I would exclude the case of extensive degeneration of the skin inasmuch as the surface to be treated is too large. Symptoms of iodine poisoning might be produced, and besides this, deep and extensive changes of the mucous membranes are present which cannot be rendered accessible to treatment.

The treatment by means of injections is more painful than that by inunctions, but has the advantage of not making so many demands upon the patient, whose frequently low intelligence renders him incapable of independent action. The patients should be under medical supervision.

For obvious reasons I have not subjected cases of nervous leprosy to this treatment. I selected euophen because it is a compound of iodine. Perhaps similar preparations might subserve our aim to effect a cure of leprosy.

Note: In the course of the above therapeutic investigation I also made experiments with pyoktannin, which was injected into the leprous nodules in solutions up to 1 per cent., inasmuch as other observers have expected to obtain curative effects from the parenchymatous administration of the aniline dyes, as for instance in cancer. I thought it possible to exert a healing action in leprosy by staining the cells and bacilli in corpore vivo. It is an easy matter to demonstrate the coloring. All that is necessary is to fill a small nodule as much as is possible with poktannin and then

exterminate it for examination. The experiments, which were continued for five months, unfortunately gave no curative results; and the nodules remained of the same size, the disease not being influenced locally or otherwise.

Book Notes.

MODERN GYNECOLOGY. A Treatise on Diseases of Women. By Charles H. Bushong, M. D., N. Y., E. B. Treat, 5 Cooper Union, 1893. Cloth, 8 vo., pp 380. Price, \$2.75.

In Gynecology the progress is so rapid that books grow old almost as soon as they drop from the press, hence, there is a constant demand for new works, and the newest is always the best. Dr. Bushong's book is finely illustrated, and not too large; it is succinctly worded, with no lengthy details of a technique that should be known to every practitioner. We could well have spared the space, small as it is, given to the soft rubber pessaries. The author does not say he employs them. We would like to know of a single competent gynecologist who does.

THE RECORDS of the American Catholic Historical Society of Philadelphia, quarterly, now in the fourth volume. The number before us contains some very interesting data concerning the early history of this country, drawn from the church records.

A Medical Pocket Atlas on Obstetrics is issued by L. Hydel, Publisher, 212 E. Fifth street, N. Y. city. It is the work of O. Schaeffer, M. D., of Munich, translated and published under the supervision of J. Clifton Edgar, M. D., Adjunct Professor of Obstetrics in the University of the City of New York. It seems to the writer that this is just what a young practitioner would want to have with him when attending an obstetric case, to refresh his own memory as to the positions, emergencies and manipulations; and perhaps to illustrate the state of affairs and his methods to the family. A picture often shows the need of operative interference in a way that no words can do. The price of the Atlas, bound in stiff boards, is \$1.80.

Mr. Hydel also publishes *The Obstetric Examination*, a short guide for Physicians, students of medicine, midwives, and students in midwifery, by Professor E. Crede, M. D., and Professor G. Leopold, M. D., (Private Medical Councillor,) with five cuts, edited (with permission of Prof. G. Leopold) by J. Clifton Edgar, M. D.

It is an extract from the fifth edition of the text-book of obstetrics for midwives published by the authors.

In order to give the widest possible publicity, in an accessible form, to the most recent experiences concerning the prevention of puerperal fever, the authors have taken two chapters from their text-book and issued them separately under this title. The chapters contain the external examination and the antiseptic regulations which are to be regarded as new and of fundamental importance. Price, 25 cents, postpaid.

News.

Hamburg allows no Russian to enter her territory, unless provided with a through ticket to America.

It is claimed that the introduction of the new small-bore rifle will necessitate an increase in the medical staffs of armies generally.

The anti-vaccinationist authorities of Leicester, England, are making things hot for their corporation doctor, for telling unwelcome truths about vaccination and the recent small-pox outbreak.

Cows fed on cotton-seed and seed-cake produce a poorly flavored and very tough butter. Gluten meal as a food raises the percentage of oleic acid and the volatile acids. The butter is highly flavored and very soft. Corn meal produces little oleic acid and an average quantity of volatile acids. Clover increases the latter and adds slightly to the oleic acid; as does spring pasturage. Early cut straw gives a butter with both below the average. It would seem as if a diet of seed-cake and gluten meal or clover should give a good average product.—*Science*.

The Times and Register.

A Weekly Journal of Medicine and Surgery.

WILLIAM F. WAUGH, A. M., M. D.,

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PHILADELPHIA, JULY 15, 1893.

INFLAMMATION OF JOINTS. ARTHRITIS.

IT goes without saying that the rational basis of logical therapy is a sound knowledge of pathology. But, let no one deceive himself, with the belief that this is all-sufficient; or that it can ever supplant clinical observation.

Pathology has done much in the way of unfolding to us the mysterious minute physical changes in the elementary structures of the body during the course of disease, but it has not given us a single solitary remedy. Indeed, the inimitable Watson used to say, that with all Laennec had done in the way of rendering a ready and more precise knowledge of pulmonary maladies, yet, with all that, this discovery made scarcely any impression on their treatment.

We are led to these reflections in considering the question of arthritis in the young. Synovial and arthritic inflammations of the hip and knee joints are

very common in the young, growing child.

Now, of late years our working textbooks for the general practitioner have been over freighted with a most complex and a needless fulness of detail on the pathology of these diseases, and almost nothing besides the author's hobby is given in treatment. There we see one of the evils of specializing. Everything is directed to the local part, the youngster is put in a harness and the limb fixed. It may be said that mechanical appliances serve a useful purpose, but, if injudiciously employed, they work incalculable injury. Resection of joints for a curable disease, is a desperate and questionable procedure.

But, for the time, look to the youngster's stomach, give him appropriate medicines, fresh air, pleasant surroundings, and nature will often work wonders. Don't cudgel your brain in trying to differentiate acute from subacute synovitis, whether it is a rheumatic, a gonorrhœal, tubercular, traumatic, or scrofulous type, whether it is serous, suppurative or fibrinous, or whether the capsule contains one or a dozen different colonies of germs. Treat the patient as well as the joint and in nineteen cases out of twenty success will reward your efforts.

PHILADELPHIA HIGHWAYS.

PHILADELPHIA physicians have complained to the Board of Health, because Fifteenth street has been torn up for some time, and malarial ailments have appeared along the blockaded streets.

Just why the good doctors should complain about this it is difficult to see. If the people had complained there would have been reason in it; but with so many doctors and so little illness as the city has this summer, the complaint seems out of place.

Some people never know when they are well off.

All over the city are evidences of the unexampled activity of the Highway Department. One is constantly compelled to turn out to avoid cuts for drains, or to go blocks out of one's way where streets are obstructed by repairing or repaving. Broad street above Filbert, and Fifteenth and South Twelfth are being paved with asphalt; and the worst spots in the cobble pavements mended. Sixteenth street is being laid with Belgian blocks, and the asphalt extended on Tasker street. The greatest improvement, however, is in the "slums," where asphalt is being laid in the courts and alleys, that seemed impossible to keep clean, with the old, broken pavings of cobble and brick. Special attention is also being given to the drainage of this district. The good effects of these measures are not limited to the immediate sanatory improvements. The fact that the city has some care for the welfare of the residents, is an incentive to individual action in the same direction; and this in turn gives a favorable inclination towards a moral reformation. We have good biblical authority for the connection between cleanness and godliness; and when the former is brought within the possibilities, the latter may be expected to follow.

It is now possible to get about the city with some comfort, even in a light wagon; while the increasing number of bicycles on the streets shows how the improved pavings are appreciated. Still, with all due credit to Director Windrim and his department, there is a vast amount of work to be yet done, before the streets are more than passable. While South Broad street is being repaired, the omnibuses have broken up the paving of North Broad street, in such a way as to render driving rather a precarious undertaking.

Bureau of Information.

Questions on all subjects relating to medicine will be received, assigned to the member of our staff best capable of advising in each case, and answered by mail.

When desired, the letters will be printed in the next issue of the Journal, and advice from our readers requested. The privileges of this Bureau are necessarily limited to our subscribers. Address all queries to

Bureau of Information,

TIMES AND REGISTER,

1725 ARCH STREET,

Philadelphia, Pa.

DO SNAKES "FASCINATE?"

A WRITER in Alden's Cyclopaedia of National History thinks the widespread belief that snakes fascinate their prey is a superstition, this belief not having been justified by fact; even though he admits that the eyes of snakes, having no movable eye-lids, may be peculiarly bright and staring. I wish to state an instance which came under my own observation.

When a lad living on my father's farm, I chanced to be by a brook near the edge of a wood. The grass was very thick and tall. Hearing the distressful screeching of some animal, I went to see what it was, supposing it was the voice of a frog being swallowed hind feet foremost by a snake; for the cry resembled that of a frog under such circumstances as I had heard. It was however the cry of a young wood thrush, which in one of his early sallies had lit down in the grass and could not get out. He had evidently been there some time and had well nigh despaired of rescue, so much so that he showed no fear of me but regarded me as a friend. I carried him home and he flew about our room, sat on my finger and ate flies off the window, drank water out of a spoon, and sang from the back of a chair. I called him Johnnie, and he soon learned to respond to his name. I took him into the field with me and he showed no disposition to fly away but came when I called.

One day I took him out into a mow-field and let him fly about me while I was cutting down the grass. I noticed him fly into a potato patch. When I called he did not come. A few minutes later, supposing something was the matter

with him, I went to the place where I saw him alight. To my horror there he was standing on a row between two hills, with his feathers all turned the wrong way and staggering towards a large striped snake which lay coiled up between the rows, a foot and a half remote from him. The snake was intently looking at the bird and did not run away on my approach. Johnnie appeared to be wholly under the power of his enemy and in a few moments staggered up against his side. I waited for nothing more but dispatched the snake and carried Johnnie to the house. From that time the bird was changed. Though I stroked his feathers down they rose up again. He sang no more, appearing to be stupid, wholly unlike the vivacity of his former self. The next day he was no better. The day after the cat took pity on him and put him out of his sufferings.

It was remarkable that the bird should have lost all fear of me as soon as he came into my hands, and that he should have preferred to stay with or about me to going off in his own natural element. It was still more remarkable that he should have so yielded to the power of the snake as, so to speak, to stagger into his very mouth, with no power on his part to get away from his would be devourer. What was it, if not some inexplicable fascination on the part of the snake, that controlled the bird's mind, reversed his feathers and thoroughly stupified him; and that for a period of two days? If this was not a case of fascination how can a man believe his own eyes?

Yet singular as was this case, I once had a young man as completely controlled by a fascinating French quack doctor. Some of his young friends brought him to me and wanted me to interest myself in his case. His inclination was toward that pretended doctor. The thoughts he injected into his mind drove all rational ideas out. He could not work. He cried and mourned and imagined all evils in his case. I pitied him from the depths of my heart; I watched over him, persuaded him and doctored him for many weeks, before I got his feathers down the right way and he was able to set himself to work again. After some months he recovered and

struck for business, going west. I received letters from him for several years, blessing me for my efforts in his behalf. If he was not fascinated by that dandy Frenchman, I do not know the meaning of the term. What snakes are to birds such deceivers are among the human species, and it is not possible to estimate the mischief they do. The robbing them of their money I believe to be the least of the harm they do. The frequent suicides must be put into this account. And when not suicide, the life-long mental perversion in respect to themselves and the consequent mental misery entailed is an unspeakable evil. Yet this venerable Hub and this highly civilized state have not an iota of law to put the rascals out. And not even a merciful cat this side of suicide may be found to bring relief to the befooled sufferers. Snakes! Fascinating snakes! E. CHENERY, M. D.

BOSTON, MASS.

COMMUNED FRACTURE OF SKULL.

I WAS called to see Samuel Salisbury, aged 19, on March 9th, who presented the following condition, viz: unconscious, the pulse and respiration slow and feeble, hemorrhage from a wound on right side of head about two inches above the ear. There was an opening through the skull into which I passed my index finger and distinguished several pieces of bone. I informed the father of the boy that it would be necessary to perform a delicate operation and requested that Dr. E. M. Moore be called. The wound was made by the kick of a horse two hours before, as he was leading him along the highway. There was a delay of seven hours before the operation, meanwhile the patient sank so low as to make it necessary to employ external warmth and stimulants hypodermically.

Under strict antiseptic rules, a button was removed with the trephine, and five detached fragments of bone; one of which penetrated the brain about an inch and a half, with a loss of about, an ounce of brain substance. The following day consciousness slowly returned, but there remained complete paralysis of left arm and leg. The dressings were removed

on the fifth and eighth days, and subsequently they were renewed daily. There was moderate suppuration with hernia cerebri, and a temperature not above 101° , the wound closing on the thirty-fifth day after receipt of injury. Motion began in the paralyzed leg in twenty days and in the arm fourteen days later, and improvement continues. His mental faculties are impaired.

Measurements of the head locate the wound at the junction of the areas of motion for the arm and leg, embracing the fissure of Roland. The symptoms following the wound were precisely such as would be looked for after an injury to this portion of brain. As to complete restoration of function in the arm and leg, there seems to be an uncertainty. It must depend either on the reproduction of that portion of brain lost, or the corresponding area on the other side performing double duty. At any event, four months have now passed since the young man was injured, and improvement has been continuous; so that he goes about without a cane and uses his hand to some extent. It being the first case of the kind that has come under my observation, I have watched its course with a great deal of interest, and as these cases are somewhat rare, I thought it might be of interest to some of your readers.

E. R. ARMSTRONG, M. D.

HOLLY, N. J.

TRITURATIONS.

WILL you kindly give in next issue of TIMES AND REGISTER, full directions for the preparation of medicines in triturations, *i. e.*, how to prepare the first, second and third decimal (1x, 2x and 3x), triturations, etc., of powders.

L. C. LAYCOCK, M. D.

[One grain of the substance is rubbed up for one hour in a mortar with nine grains of milk sugar. This yields the 1x; one grain of which, rubbed up in the same way, with nine grains of milk sugar yields the 2x, and so on. Thus, one grain of the 1x contains $\frac{1}{10}$ of the drug; one grain of the 2x, $\frac{1}{100}$ grain; of the 3x, $\frac{1}{1000}$ grain; while a grain of the 30x contains one-ottillionth grain of the original drug, provided the trituration has been perfectly performed. As this would require over six hundred quintillions of tons of milk sugar, a mass sufficient to make six hundred thousand worlds like ours, it is to be presumed that very few pharmacies make up a whole grain to the 30x trituration at one time.—W. F. W.]

AUREL SYPHILIS.

In regards to questions asked by my friend (Max Toeplitz, M. D.) in Vol. 26, No. 23; I will say that ere No. 21 of the above volume reached me, my patient was about cured by my treatment; viz. proto-iodide of mercury in doses as large as he could bear, with placebos which was his only treatment.

COLORADO.

Would you kindly inform me whether I could register to practice in Colorado without an examination? My health has failed greatly of late, I have a cough, spitting of blood, in fact, all the symptoms of incipient phthisis; and for that reason I wish to change. What would you advise me to do?

[Colorado does not require an examination for graduates, and the registry fees are \$5.00 for the Examining Board, and \$1.00 for the County Clerk. Your residence there, or in Arizona, should benefit your health, but unless silver gets a boost, Colorado will be very poor for some years to come. Still, she has other industries besides silver-mining; and affairs may not be so bad as they now look.—W. F. W.]

Notes.

A personage strayed into the editorial office last week, who claimed to be a Dublin ophthalmologist. He had been four years in this country, and as far west as Omaha, but concluded there were better opportunities at home; and was collecting funds for that purpose. He got none here. Any man who cannot find a location in America after four years' effort ought to go straight to the nearest asylum for the imbecile and ask for admission, at once.

A Scotch parish board advertised for proposals to furnish medical attendance, medicines and surgical appliances for one year. Six bids were received, at so much a head. The highest was 28 cents, the lowest 11 cents per pauper, per annum. Cheap!

Annotations.

ROMANES, in the *Open Court*, says that Darwin's theory of heredity is that all parts of the organism generate anew in every individual, the formative material constituting a new organism; this material being collected from all parts of the parents' bodies.

Weismann supposes that this material stands to the parent's body much as a parasite. In each generation, a small part of this substance is told off to develop a new body, which resembles the parent's body only because developed from the same substance, which continues through all generations of successive perishing bodies.

Query:—According to Darwin's theory how could two deaf-mutes possibly have a child who was not a deaf-mute?

ARMY MEDICAL SERVICE REFORMS.

SURGEON-GENERAL Sternberg has announced two new projects, in the department, at the head of which he has so recently been placed. He is to organize an Army Medical School, where newly appointed assistant surgeons are to receive a course of instruction in their special duties. The other project is to break up the practice of keeping city billets for older officers, and instead of this, bringing the younger surgeons on for a year's practice at a time, in attending the families of officers, etc.

This is a wise project, as it will give these men the advantage of a more generalized practice than they now enjoy, and will also give some others a much-needed taste of frontier duty.

But won't the Coburgers get up and howl! General Sternberg must have powerful backing to enable him to strike such a blow at the favoritism sanctioned by immemorial usage.

REGISTRATION OF PROSTITUTES.

IN 1864 Great Britain passed the Contagious Diseases Act. The proportion of primary venereal cases admitted to hospital during the first year of its enforcement was ninety-one of every 1000 admissions. In 1878 the proportion had

fallen to thirty-five. The number of registered prostitutes fell from 2600 in 1870, to 1870 in 1879; while the proportion of those found to be diseased on examination fell from 76.24 per cent. in 1865 to 7.40 in 1879.

Then the opponents of the Act went to work, and in 1883 obtained its repeal. Surgeon-General Moore enumerates among the advantages of the Act, the diminution of severity of disease, cure of disease, reduction of number of brothels, lessening of juvenile prostitution, impossibility of holding young girls as prisoners in brothels, chances of reform afforded lost women. These objects were thought worthy; but the opponents thought otherwise. When the Act was repealed, the hospital admissions for secondary syphilis rose in 6 years from 24.4 per 1000 of strength, to 66.3. Other venereal affections rose in the same period from 90.2 to 220.7 per 1000. More than half the British army in India were rendered incapable of service by venereal diseases.—*Provincial Med Jour.*

DILATING THE PYLORUS.

WYMAN (*Med. Age*) describes a case of pyloric stricture, with the following symptoms: Dyspepsia of a year's duration; epigastric pain lasting an hour or more after eating, with belching or mucous vomiting; the attacks coming oftener, with vomiting of fetid, partly digested food, and intolerance of solids. Gradual emaciation; vomiting became periodical; epigastric tenderness; pyloric hardness. Stomach absorptive power was shown, by giving iodide in capsule, and testing saliva for free iodine. A little free hydrochloric acid was found in his stomach. Milk was the only food that seemed to pass the pylorus. The bowels were constipated, temper fretful and future hopeless.

The abdomen was opened, the stomach drawn partly out and an incision one inch long made in the least vascular part. The pylorus was very hard, and contracted to the size of a slate-pencil. By a uterine divulsor it was stretched until the finger could pass freely, and the incisions closed. The patient recovered from the operation, and was reported as gaining flesh and strength; the pain and

vomiting having disappeared. The time elapsed is not given; nor the date of the operation.

THE Kensington Hospital for Women has issued its report, for the year ending October 10, 1892. During the year, 130 patients have been under treatment. Forty-one required abdominal sections. We hope this will set at rest the injurious reports, that at this institution every woman who could be caught and corraled in its walls is castrated, regardless of anything but the opportunity. More than two-thirds of those admitted got away unmutilated. One Cæsarean section was performed, saving the lives of mother and child. Seventy-five other operations were performed. A dispensary has been opened in connection with the hospital. Among the numerous hospitals of Philadelphia there is none in which more creditable work is being done than in this one. Dr. Chas. P. Noble is filling his predecessor, Dr. Kelly's place, most admirably.

"WINE, WIFE AND SONG."

A CLEVELAND genius, who is some ten centuries ahead of his day, has formulated precisely the therapy of "wine, women and song." Nux for the beer guzzler, gelsemium for the dude who goes on champagne "jags," and sulphuric acid for the tough citizen whose throat craves for "rot-gut" whiskey.

Henbane soothes the sorrows of the lover whom disappointment renders noisy; belladonna helps the moody, dangerous man; nux suits the sensualist, while staphisagria soothes wounded pride. If the rejected swear, "dope" him with veratrum; if he lie (that is, unduly or unusually, else this were a universal panacea), give him anacardium; but if he show himself a blackguard, chamomile elevates him to a gentlemanly level. If intensely erotic, give him camphor.

As to song, the author would drown the tenor in stramonium; while for the man who writhes under the song-gift of his neighbor, he orders sodium chloride, followed by sulphur and belladonna.

Dr. Kraft stops, unfortunately, too soon; for he does not tell us what remedies to employ for the midnight cat-con-

cert, or whether the Italian who grinds out "Comrades" should take the dose or give it to his monkey. In fact, the whole subject needs further exploitation.

The Medical Digest.

UTERINE REMEDIES.

Macrotys.—It is the remedy par excellence to stimulate *normal* functional activity of the uterus and ovaries at any period. With the approach of menstruation, it may be given for pelvic fullness, backache, leg-ache, and nervous irritability. At any time it may be thought of for suppression of the menses. In the early months of pregnancy it will relieve unpleasant sympathies and symptoms; at any time during pregnancy, for pelvic pains, soreness and backache. During the last two months of pregnancy, it may be used as a *partus preparator*, as it will render labor easier and quicker, and give a better getting up. Use a tincture of the *fresh* root in the proportion of gtt. x to 3j., to water 3iv., in doses of one teaspoonful.

Caulophyllum.—The blue cohosh possesses similar properties, as do all varieties of cohosh; but not the same.

Pulsatilla.—*Pulsatilla* is the woman's remedy for all nervousness having an origin in and from the sexual system. It is not only the remedy for women, but for nervous men, and for morbid sympathies having their origin in the sexual system, and especially for disease of the sexual function. We are accustomed to say that *pulsatilla* is the remedy for the sad, despondent, who look on the dark side of life, but it will hardly do to restrict it to these. I have seen excellent results in the very reversed conditions, where the nervous outbreak took the form of gayety and mirth. But in all cases, feebleness of the circulation will be observed as a marked feature, and we do not use it where there is irritation or tendency to inflammation.

It is one of our best remedies to restore the menstrual flow, when the arrest is the result of enfeebled innervation and circulation. Usually it is used with the *macrotys* for its emmenagogue action, and they work together very nicely, and

the one seems to supplement the other.

It is a remedy for pain, and especially for that variety known as dysmenorrhœa, and with it and macrotys I have cured many stubborn cases. I prescribe it to be taken a week before the flow commences, and to continue until the flow is free and painless.

Mitchella.—The *Mitchella* exerts a direct influence upon the reproductive apparatus of the female, giving tone and improving functional activity. It has been extensively used as a uterine tonic, to promote menstruation, to remove false pains, and unpleasant sensations in the latter months of pregnancy, and has been thought to be a good preparative to labor, rendering the birth of the child easier, and less liable to accidents.

Ruta Graveolens.—It exerts a direct influence upon the nervous system, relieving irritation and pain, in small doses, continued, improving nutrition of the nerve centers. It acts upon the urinary and reproductive apparatus, and has been employed with advantage as a stimulant to them.

Polygonum Punctatum. One of our most certain stimulant diaphoretics. It is also one of the best emmenagogues; especially when the arrest is from cold. It influences the urinary and reproductive organs, but its action in these directions needs to be studied.

Hamamelis.—For congestion and impairment of the venous circulation, we have no remedy superior to the *hamamelis*. The indications are a feeling of weight and fullness in the pelvis and dragging; the woman will feel as if the perineal tissues were relaxed and not sufficient to hold up the pelvic viscera. Examination will show venous engorgement and enlarged veins, if it has continued long.

Ergot.—The old use of ergot as an oxytocic is not its best use. In small doses, one to ten drops, it is a stimulant to the capillary vessels, and will check hemorrhage. It is also a direct stimulant to the nervous supply of uterus and ovaries. The sharpest indication for the remedy is an impairment of sensation with relaxation of the muscular tissues of the pelvis, and tendency to sanguineous or mucoid discharge.

Ustilago Maidis.—In some cases this remedy will be found better than ergot,

with the indications above named. Relaxation of the structures across the pelvic outlet will suggest the remedy, and will be strengthened by difficulty in defecation and urination from muscular feebleness.

Lobelia.—In obstetric medicine we employ lobelia in rigidity of the os and perineum, when the tissues are full or thickened. In very small doses we use it during pregnancy, when there is a sensation of rigidity and fullness of the genitalia.

Gelsemium.—We use gelsemium as the relaxant in rigid os and perineum when the tissues are thinned and unyielding; the os will be thin and sharp like a knife-blade, but it will not dilate.

Gelsemium is also the remedy for difficult urination during pregnancy, especially with scant secretion. It is also indicated by albumen in the urine, and feeling of constriction about the base of the brain, and general headache.

Hedeoma.—For scanty lochial discharge or suppression we have no remedy that equals the old-fashioned penny-royal; in infusion, to be given with aconite, macrotys, or gelsemium, as may be indicated.

Chlorate of Potash.—The uterine antiseptic is chlorate of potassium, and the indication for it always is a bad odor. In doses of from two to ten grains it is one of the surest remedies.

Phytolacca.—If there is mammary irritation and tendency to inflammation and suppuration; in uterine disease, when the indications are sensitive breasts, fullness, or even soreness of the nipples.

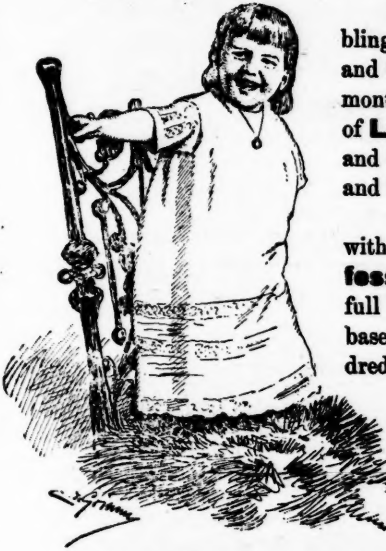
Apocynum.—The ordinary indication for apocynum is œdema. Swelling of the feet or eyelids, puffiness of hands, fullness of vulva, all call for apocynum. In minute doses it is a remedy for profuse or prolonged menstruation, or menorrhagia.

Ipecac.—This is also a remedy for menorrhagia in irritable uterus, as well as for sub-involution and hypertrophy, in vaginitis with leucorrhœa, aconite or veratrum usually going with it.

Cuprum.—Rademacher's tincture of copper is an excellent remedy in some cases of uterine disease, where the issues are full or relaxed. The common indication, fullness and relaxation of skin, with

THERE ARE ONLY TWO PREPARED FOODS THAT WILL
NOURISH A CHILD AS PERFECTLY AS HUMAN MILK. They are

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The former is an **all-milk Food**, closely resembling human milk in **character, composition and taste**, and designed for infants from birth to seven months of age, and the latter is composed of equal parts of **Lacto-Preparata** and **Dextrinated Wheat**, and designed for the remainder of the nursing period and for invalids.

We make the statement at the head of this page with a knowledge of the general opinion of the **Profession** in reference to **artificial feeding**, and a full appreciation of what our statement implies. It is based on personal observation and actual test in hundreds of cases, and we hope that no **Physician** will doubt this statement without verifying it by making a trial of our Infant Foods as now put up in **hermetically sealed cans**.

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of the digestive organs where no **food** or even **water** can be retained. In **Phthisis**, it will increase **weight** and **strength** far more rapidly than **Cod Liver Oil**.

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Ext. Olei Morrhuæ Alcoholicum.
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Nausea, taste and smell avoided.

Morrhuol obtains excellent results wherever the oil is indicated, but is not tolerated. It is the type of those remedies used in wasting diseases which act by stimulating nutrition.

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In spherical capsules, each of which contains 1 minim of Créosote (equal to 90% of Guaiacol) and 3 minims of Morrhuol.

Dose: 4 to 12 capsules daily.

After a few days there is a noticeable increase in the appetite and improved general condition, besides decrease in the Expectorations, Night sweats and Cough.

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Use whenever Iodine is indicated

It has been found superior to Cod Liver Oil, especially in children's maladies. It is recommended in phthisis, la grippe, anaemia, rheumatism, bronchitis, asthma, emphysema and chronic catarrh by such eminent French physicians as Drs. Dujardin-Beaumetz, Féréol, Huchard, de Saint-Germain, Simon, Sevestre, Gibert, Moizard and Abadie.

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greenish yellowish discoloration, will suggest the remedy.

Nux.—In reflex nausea, nux, in small doses (gtt. j. to water ʒiv). In constipation associated with uterine disease, one drop in a glass of water, before breakfast, is a good remedy. In enfeebled muscular power of rectum, the small dose of nux with aloes is a good treatment.

Ignatia.—Ignatia is the woman's remedy, nux the man's. It is indicated by dragging pains in the right hypochondrium, gastrodynia, uterine colic, uterine atony, leucorrhœa.

Viburnum.—The common name, cramp bark, will suggest a common use of this remedy. It is the anti-abortion, and is the most certain of our remedies for this purpose. It is also the remedy for irritable uterus, with pains like contractions.

Collinsonia.—This is a remedy when there is a sense of rawness with contractions, as if some foreign body had pressed into the tissues.

Phosphorus.—Phosphorus is indicated by ovarian pain and fullness with mucoid discharge.

Ferrum.—Howe's acid iron (nitric) is a good remedy in atony and relaxation with leucorrhœa. The tincture of the muriate is indicated by dark redness of mucous membrane and erosion of the cervix.

Rhus.—Burning pain and smarting, with bright redness, will furnish the indication for rhus.

Agrimonia.—Dragging pain down the uterers, with painful micturition, with prolapsus, will ask for agrimonia.

Eryngium.—Frequent desires to urinate, with sense of excoriation along genital and urinary passages, will suggest the eryngium.—*Eclectic Med. Journal*.

CEREBRIN.—A bottle of cerebrin was sent by the company with which Dr. Hammond's son-in-law is connected, to Professor Dixon, and by him placed at my disposal. I selected a typical case for its administration. A lady had for several years been confined to her bed, with no other symptoms warranting it except general debility. Repeated examinations showed an absence of structural organic disease. Here, a direct

cerebral stimulant, a "brain-food," was the article specially indicated. The cerebrin was given in doses of five drops, twice daily, for one week, and no perceptible effect was obtained.—*Waugh*.

TROPACOCAINE is said by Ferdinands (*British Medical Jour.*, June 24, 1893,) to be more reliable and deeper in its action than cocaine, the anesthesia lasts a little longer, it anesthetizes inflamed tissue better, and does not produce any corneal haze. For general use a two to three per cent. solution answers, but five per cent. is safe. Solutions in distilled water keep for months. It has neither mydriatic nor hemostatic action.

FETID SPUTA.

A case of pulmonary abscess with fetid sputa was treated by McNaught (*Brit. Med. Jour.*, June 24, 1893,) by intralaryngeal injections of guaiacol and menthol:

R Guaiacol ʒjss
Menthol ʒx
Ol. olive ʒ viij

M. S. Half a drachm injected into the larynx once a day. Pills of iodoform, creosote, aa gr. j, and croton chloral hyd. gr. ij, were also given, thrice daily.

For chronic dysenteric ulcer with stricture near the sigmoid flexure, with hemorrhagic stools, and scybala, Ghosal gave a powder of rhubarb, gr. v., hyd. cum creâ. gr. ½. and soda bicarb. gr. i, at bedtime. Diet of boiled rice, sago and milk. Before and after each stool glycerine with corrosive sublimate, gr ¼ to the ounce, was applied by the finger. In a week the stools became healthy, but, as the hemorrhage continued, dialyzed iron, calumba, chloroform and nux vomica were given, until the patient was well.—*Calcutta Med. Rep.*

UREA is a substance whose importance cannot be overestimated, as it is the principal product of retrograde changes of nitrogenous materials, and next to water, is the most abundant and important ingredient found in normal urine. If it be retained in the system, it is a true poison. and if the retention be marked and not relieved, death follows. Measuring the quantity in the urine is a guide to its

accumulation in the system and a warning of convulsions or death, as well as a guide to the proper treatment to prevent these catastrophies

Of the many methods of estimating the amount of urea in urine, the following by Dr. Chas. Doremus, of New York, is the most practical: A curved tube, similar to the saccharometer of Einhorn, is filled to the bulb with a known solution of hypobromite, and then with a pipette the urine is slowly introduced. Rapidly the urea is decomposed and the nitrogen (N) fills the upper end of the tube, displacing the urine into the bulb. When the action has ceased, the graduations show the number of grams or grains of urea to the c. c. or oz., then, by knowing the amount of urine passed during the twenty-four hours, the daily amount of urea is easily found.—*Stanbro, Buffalo M. & S. Journal.*

BANERJEE experimenting on the viperine snakes of India, found that in dogs strychnine acted as an antidote to the venom; and when dogs were poisoned with strychnine, the venom antidoted the strychnine.

MENDELSSOHN advises a diet of meat for uricemia; as the urea formed is the best solvent for uric acid. Urecidine, a new remedy, does not dissolve uric acid directly; but increases the amount of urine excreted, and this dissolves out the acid. Free water drinking is necessary.

CHRONICAL TROPICAL DIARRHEA.—*Symptoms*:—Malaise; anorexia; fullness after eating, relieved by belching; irregular bowels, 4 to 12 daily: clay colored, offensive, liquid passed in early morning, with flatus, perhaps lenterie; portal plethora; tongue white; or red and sore, if bowels are denuded: uneasiness or griping; sickness; borborygmi and thirst. In time he becomes anemic; the motions are looser, perhaps bloody, mucous or gelatinoid. Weakness, thirst and sickness increase. The urine is scanty and concentrated; cheeks hollow, eyes sunken, face pinched, skin dry, temperature subnormal, slight rise at night; tenderness over cæcum, colon or ileum; liver tender on pressure, it and the spleen may be enlarged. Extreme

emaciation; œdema beginning at the feet.

Treatment.—Milk diet and *bael* for mild cases. For the evening fever a two-grain quinine pill each morning. Good effects shown within a week. For constipation, half an ounce of castor oil in the early morning.

In severe cases, with hepatic disease, calomel, $\frac{1}{8}$ grain, twice a day, acts like a charm. If the milk excites the bowel to immediate action, a few drops of laudanum are added. The milk diet is to be continued thirty or forty days, or till the sores in the mouth are healed. Rest is needful, and protection from draughts or chills. Free water drinking is objectionable. Sponging with tepid water is useful. During convalescence, gentle exercise, change of air, calumba and mild chalybeates will hasten the cure.—*Das, Calcutta Med. Rep.*

INFILTRATION ANESTHESIA.—Hacker says any cutting may be painlessly performed, after throwing the following solution into the intercellular tissues:

Cocain. hydrochlorat . . . gr. jss
Sodii chlorid gr. iij
Aque dest 3 iij 3jss

M. Several injections are required to produce œdema.

TREATMENT OF "SUNSTROKE."—For cases with temperature above 104° F.: Ice and ice-water to head, body, rectum; continued until temperature comes down to 100° , and repeated if it rises again. Antipyrine hypodermically, ten to thirty grains; or acetanilide, by rectum. For cases with low temperature, feeble pulse, cold extremities and profuse sweating: Strychnine, gr. $\frac{1}{40}$ to $\frac{1}{20}$, hypodermically, or tincture digitalis, gtt. xx., warmth to feet, lower head, loosen clothes, alcohol, camphor or ammonia in small and frequent doses.

For medium or doubtful cases: Atropine, gr. $\frac{1}{100}$ hypodermically; acid phosphate; cold or heat to head, as feeble or exhaustive symptoms predominate.—*Waugh.*

BRIGHT'S DISEASE.—Dieulafoy considers albuminuria an unreliable symptom. The initial stage is accompanied

by noises in the ears, vertigo, frequent desires to micturate, the *doigt mort* and *cryesthesia*.

M. In *doigt mort*, or dead finger, the patient complains of pins and needles in hands and fingers, and the ends become pale and insensible. *Cryesthesia* is extreme impressionability to cold, especially in the legs, knees and feet. Slight morning epistaxis may be added to this list. These symptoms, of little value singly, when taken together, warrant the diagnosis; when cedema and albuminuria are absent. The milk diet is the only trustworthy remedy.

FOR SORE THROAT.—

R Morphine sulphat. gr. iv
Acid. carbolic
Acid. tannic aa 3ss
Glycerini
Aque aa 3iv
M. S. Paint on throat three times a day.

SUN DIARRHEA MIXTURE.—

Tincture of opium,
Tincture of capsicum,
Tincture of rhubarb,
Spirit of camphor,
Spirit of peppermint, each equal
. volumes.

Mix and filter.

LOOMIS' DIARRHEA MIXTURE.—

Tincture of opium, . . . 1-2 fluid ounce
Tincture of rhubarb . 1-2 fluid ounce
Compound tincture of catechu
. . . (U. S. P.) 1 fluid ounce
Oil of sassafras 20 minims
Compound tincture of lavender,
. . . enough to make 4 fluid ounces.

SQUIBB'S DIARRHEA MIXTURE.—

Tincture of opium . . . 1 fluid ounce
Tincture of capsicum . 1 fluid ounce
Spirit of camphor . . . 1 fluid ounce
Purified chloroform . . 180 minims
Alcohol, enough to make,
. . . 5 fluid ounces.

INTERSTITIAL NEPHRITIS.—Huchard recommends the following for gouty cases with dyspnea, weak heart, slight cedema, free urine, and very little albumen.

1. Exclusive milk diet for five days; ten ounces every two hours for six doses.

2. R Ext. kolæ fl 3jss
Ext. cocæ 3iv
M. S. 3j at 8 A. M. and at noon, in the milk.

This is to counteract the weakness.

3. If the milk disagrees, add a little Vichy, and five or six wafers, daily, each

containing 12 grains of benzonaphthol and 4 grains of pancreatine. Or, a little rum, brandy, or cherry laurel water can be added to the milk.

4. Every succeeding month the patient is to be put on this diet for five days, to flush the kidneys.

5. For three days of each month give three pills daily, containing one grain each, of digitalis, scammony and squill.

6. After the milk diet give solid food, with plenty of milk. For some months give no meat, as this causes dyspnea.

7. Give iodide of sodium, as a heart tonic, gr. vi to x daily, for 20 days of each month.

8. Stimulate the skin by dry friction or liniments.—*Medical Press and Circ.*

STERILIZED DRESSINGS.

Hochenegg applies the following fluid to one side of his dressings, to show when disinfection is complete. The fluid is brownish when applied, but becomes bright red when sterilized in the oven. The date of sterilization may be written with this fluid on the articles.

R Alum acet. liq. (Pharm. Austr. 7th ed),
Aque aa 3v
Alizarin, in paste, 20 per cent. gr. lxxv.

M.

—*Med. Press.*

LONGINGS OF PREGNANCY.

Giles has investigated 300 cases of what he terms "natural" longings. They are vastly more frequent in married primiparæ, and much less so in unmarried girls and in multiparæ. In many cases they are to be attributed to the popular belief that they are to be expected. Some are manifestations of disordered nervous condition, while others are instinctive cravings for substances needed by the mother or her child.—*Med. Press.*

GELSEMIUM USELESS.—From a study of the pharmacological action of gelsemium, Cushny (*Practitioner*) concludes that there are no indications for which the drug is suited. It has no action on temperature, while in ophthalmic practice its irritant action and the slowness of dilation of the pupil under its use, render

it useless beside homatropine. Still, it may be of some value in neuralgia or in ague.

In the *British Medical Journal* Coyle records a case of typhoid fever treated by carbolic acid, gr. ijss, in pill, twice a day. The temperature was reduced three degrees.

Some fine day one of these gentlemen will discover the sulphocarbolates.

Disinfectants act more powerfully the higher their temperature.

Intra-uterine injections of glycerine are employed to facilitate labor. From one to three ounces are injected, care being taken not to allow any air to enter. The pains soon grow stronger.

KRESIN.—Kresin has fully confirmed the claims made for it by the manufacturers. It is an ideal antiseptic for the surgeon; being efficient, non-irritant to the hands, non-corrosive to instruments, and making a clear solution with water, for the instrument trays. In this it replaces creoline, which conceals the instruments from view. Nothing is more annoying than being compelled to fish about in an opaque fluid for a hemostat, when it is needed in a hurry.

A writer in the *British Medical Journal* thinks he aborted an attack of measles by anointing the patient with "oleusaban," an oily preparation of eucalyptus.

FOR ECZEMA:—

R Acidi borici 3j
Acidi salicylici gr. vj
Ung. aquæ rose 3j

M.

—Rambo, *Columbus Med. Jour.*

Smart says the sulphate of iron is the best chalybeate; the carbonates coming next, and then the syrup of the chloride. This is not a mere opinion based on individual preference, but the result of scientific research.

Pearse (*Prov. Med. Jour.*) says that the dislike of fat in pre-phthisical cases, is no more characteristic than their fond-

ness for onions; and that much benefit is experienced from the free use of onions.

PROLAPSUS OF THE UMBILICAL CORD. —Take a soft sponge the size of a large orange, wash it well in hot water, then push up the cord in an interval of pain, passing up immediately after it the moist warm sponge between the uterus and the head of the child.

This simple operation prevents the return of the cord, and the sponge comes away with the placenta. After an experience of more than thirty-six years, I have found this method the most satisfactory way of dealing with cases of prolapsed funis.—*Brit. Med. Jour.*

THE GENU-PECTORAL POSITION IN CERTAIN UNFAVORABLE PRESENTATIONS.—In the first volume of the *British Medical Journal* for 1890, page 888, I drew attention to the fact that delivery was easily effected in a case in which the head, hand, and foot presented—and in which I had failed to accomplish it whilst the patient was lying on her side—by placing the woman in the knee-chest position. I have recently had another case in which the same method of procedure served me well.

Mrs. W., a very stout woman, aged 39, one child born seventeen years before, never pregnant since, was taken in labor at the eighth month. I found the membranes ruptured and the child presenting by the breech. Labor proceeded normally until all but the head was born, when a delay occurred. Passing my fingers, I discovered the head of another child occupying the pelvis; interlocking that of the first. The patient being on her left side, I found that I could not, without using an unjustifiable amount of force, disengage them. The condition was exactly that illustrated in Dr. Playfair's plate of locked heads.

Remembering my former case, and obtaining the aid of my assistant, I found that by placing the patient on her knees and chest, and thus allowing the uterus and its contents to fall forward, I was able with very slight exertion to push the head of the second child above the brim. The delivery of the first was then easily effected, and a few pains completed the birth of the second. The

mother did well, but the children were still born, the first having been dead before the advent of labor, as was proved by its macerated condition.—*Brit. Med. Jour.*

Kirk (*Dental Cosmos*) recommends magnesium peroxide for discolored teeth. The decomposition products are nascent oxygen and magnesium oxide. Magnesium sulphate and sodium peroxide are mixed in equivalent proportions; the reaction occurs, and the resulting mass may be packed into a discolored tooth and left for weeks. The oxygen is given off very slowly.

FECAL OVERFLOW.

We meet cases with symptoms of constipation, but at the same time having one or two full stools daily. In these there is prolonged retention of feces; there has been gradual filling up of the bowel, and now, as fresh excrements are added daily, a portion must necessarily be discharged. Such evacuations are not natural, but are a kind of fecal overflow, similar to the overflow from an over-distended bladder. Under these conditions there is a prolonged retention of feces in the intestine. This gives time and a good culture medium for increased production of the normal intestinal micro-organisms, while foreign germs which have been introduced have an excellent opportunity for development.—*Indiana Med. Jour.*

PARTIAL AMPUTATIONS OF THE FOOT.

—Dr. T. H. Manley, of New York, read a paper on this subject. In spite of the fact that instrument-makers say that partial amputations of the foot yield results less satisfactory than amputation of the leg at the joint of election with the application of an artificial leg, the author wished to uphold the old principle of the preservation of healthy structures as far as possible. The more he sees of lacerations of the feet the more doubtful tissue he spares. Although the result of the tarsal amputations is not always satisfactory, an amputation of the leg later can always be resorted to if necessary. Nor is the artificial limb so invariably satisfactory as it is often represented. It

necessitates time, care, and expense, and not infrequently causes trouble in the stump.—*Medical Record.*

Warren recommends peroxide of hydrogen as a remedy for asthma. He uses a condensed air apparatus and a nebulizer.

For the paroxysms he gives iodide of ethyl by inhalation.

The Good Physician Hospital for Colored people, was opened in Columbia, South Carolina, on June 21st.

This institution fills a "long felt want," being at present the only Hospital in Columbia (the White Hospital is still under the process of erection) and as far as I can learn there are not half a dozen such institutions in the entire South, where they are so sorely needed.

Our darker brethren have been sadly neglected, as far as the care of their bodies is concerned; their ailments tell the tale better than any words can, of poor hygienic surroundings, filth, lack of nourishment and neglect of small things for instance; I was called to see a woman with "an afflicted leg." I found a chronic ulcer of three years standing, it extended from the knee to the ankle almost encircling the limb, and very nearly to the bone, the thigh was swollen to a considerable extent the patient emaciated. She had been in bed ten days. On removing the dirty rags which acted as a dressing I found the ulcer fly-blown. I proceeded to dress it antiseptically (as well as I could under the circumstances) and now (two weeks later) there is no swelling whatever above the knee, the ulcer has a healthy floor, the odor has disappeared but the patient—she will never live to be cured. She resists all supporting treatment, and is in such an asthenic condition, that I look on every visit as my last, this is only one of numerous instances and shows how discouraging is the practice of medicine among such poor self-neglected creatures.

The Hospital while under the auspices of the Protestant Episcopal Church is open to all creeds and sects, and is entirely dependent upon its friends for its support. It is intended for acute non-

contagious diseases and will take chronic cases only under special circumstances. It has a dispensary for outside patients. It is under the charge of a resident physician who also acts as druggist, head nurse and general superintendent; she is assisted by a nurse who acts as housekeeper.

The resident physicians visit and prescribe for such patients as can not be admitted to the hospital and the dispensary furnishes the medicine.

The following are the rules and regulations.

HOSPITAL RULES.

1. Patients will be admitted to this Hospital on the recommendation of a reputable Physician.
2. No chronic cases will be admitted except by special consent of the Board of Managers.
3. Contagious diseases will not be admitted.
4. No patient will be admitted while under the influence of liquor. Diseases resulting from debauchery and dissipation will not be treated in this Hospital.
5. Physicians wishing to send patients to the Hospital shall give a day's notice beforehand to the resident Physician. This does not apply to accidents requiring surgical treatment.
6. Patients will be required to leave the Hospital when, in the judgment of the Physician, they require no further treatment.
7. Visitors will be admitted only by consent of the resident Physician or Nurse in charge.
8. Clergymen calling upon patients under their pastoral charge are requested to be governed by the judgment of the Physician in their ministrations.

DISPENSARY RULES.

1. Dispensary for outside patients will be opened from 2.30 to 5 P. M., Sundays excepted.
2. A fee will be charged in all cases, which will be regulated by the circumstances governing each case.

MARY V. GLENTON, M. D.

Physician in charge.

A very exhaustive report on the great value of diabetin was incorporated in a paper on diabetes mellitus, read by Privy

Councillor Professor Dr. Leyden of Berlin University at the XV. Congress of the Berlin Balneological Society, held March 10th, 1893.

The paper is published in full in the "Deutsche Medizinal-Zeitung, June 5th and 8th, 1893, numbers 45 and 46 and we give its salient points below

Prof. Leyden referred to the various experiments which had been made twenty years ago at his clinic (then in Strassburg) with inulin and levulose by one of his students, Dr. Komanos. It was shown at that time already that the excretion of sugar was diminished when diabetic patients were given these particular forms of sugar. At that time levulose was very high-priced. Since then the price has been considerably reduced by the Schering process, and therefore Prof. Leyden in 1891 and 1892 again took up these experiments.

Dr. G. Klemperer, his assistant was able to prove, in the case of two diabetic patients, that the exhibition of from 25.0 to 60.0 grammes (1 to 2 ounces) of levulose daily for a short period of time, does not increase the sugar of patients, suffering from the grave form of diabetes.

The next experiments were made at the female division of the clinic by Dr. Heyse, Staff-Surgeon to the German Army.

The daily amount of carbo-hydrates partaken by the first patient was 170.0-180.0 grammes (about 6 ounces) during some periods 50.0 grammes (1 $\frac{3}{4}$ ounces) of levulose was substituted for the same quantity of cane-sugar.

The proportion of sugar in the urine to the quantity of carbo-hydrates taken was found to be: for levulose (average of 24 experimental days)-3.9:100; or cane-sugar (average of 14 experimental days)-6.6:100.

The difference in favor of levulose therefore, amounted to 2.7 per cent.

For the second patient the same relation was found to be: for levulose (average of 11 experimental days): 27.5:100; for cane-sugar, (average of 12 experimental days)-31.9:100.

The difference in favor of levulose amounted to 4.4 per cent. The sugar was estimated in the urine by polarisation, titration with Fehling's solution and with Einhorn's fermentation tube,

all the methods giving corresponding results.

A most remarkable fact, observed in connection with this case is the following:

During the exhibition of levulose, the amount of sugar in the urine decreased from day to day during the experimental period, so that the oxidation of the carbo-hydrates increased constantly, showing an adaptation of the system, while just the reverse was true for cane-sugar, the daily amount of sugar in the urine increased during that experimental period.

The result of these therapeutical trials (which are illustrated by diagrammatic curves) is a very valuable one. It is shown thereby that levulose is put to much better use by diabetic patients, and less of it is excreted by the urine than of cane-sugar, which also includes the sugar formed in the system from the carbo-hydrates of the food. Although none of the above cases were of a very grave character, two at least must be considered as quite serious ones.

A portion of the levulose was excreted as dextrose without having been put to any use, but this was much less than with ordinary sugar. An amount, more or less considerable, was certainly consumed and put to use in the organism.

These results certainly should encourage us to make use of levulose in the treatment of diabetic patients, for the reason that, if a moderate amount of this form of sugar is partaken of, say 50.0 grammes or a little more (nearly 2 ounces) per day, a much larger portion of it is consumed by the system, while only an inconsiderable portion is again excreted with the urine.

Prof. Leyden, in continuing, dwells upon the fact that the so-called symptomatic treatment of diabetes is deceptive, in so far as the intention of the physician is only directed towards diminishing or abolishing the excretion of sugar in the urine, by totally withholding sugar and sugar-forming food from the patient.

While it cannot be denied that the unconsumed sugar, circulating in the blood, has a pernicious influence on all the various tissues of the body, we must take in consideration the fact that in withholding all the food mentioned, we actually starve our patient.

Sugar and sugar-forming food constitutes more than half of the nourishment a healthy person needs. When we feed diabetic patients on fat and albuminoid food only, we therefore force him to live on his own bone and flesh, from which the system is forced to draw for its needed supply of carbo-hydrates.

It is well known that pure meat-diet carries with it the great danger of inducing diabetic coma and it is therefore the imperative duty of the physician to furnish his patient with a moderate amount of sugar and sugar-forming food. At the same time, in order to provide for an ample excretion of the circulating sugar, Prof. Leyden suggests to encourage the patient to imbibe a sufficient quantity of liquids.

Such therapeutic measures also tend to avert another fatal danger, viz. death from sheer inanition. It is evident that a diabetic who cannot supply to his system the substances necessary to maintain his strength, and to keep the tissues from wasting away, must eventually go on to complete dissolution. Therefore, Prof. Leyden maintains, *that the prime indication is to feed diabetic patients well, in order to prevent progressive emaciation.*

The excellent advice which he gives in this respect, as the quantity and quality of the food to be prescribed it would lead too far to detail here. But in the light of the fundamental principle, thus laid down by this great clinician, it is evident of what great value levulose (diabetin) must be in diabetes, since sugar and sugar-forming food must be partaken of to a certain extent by these patients.

The name of diabetine to this levulose was given by E. Schering because its main therapeutic use is that of a substitute for cane-sugar in the regimen of patients suffering from diabetes.

Diabetin is supplied in 1 pound screw-top glass jars.

SCHERING & GLATZ,

55 Maiden Lane New York,
Sole Agents for the United States and
Canada.

At the late meeting of the American Medical Association, a new operation for varicose veins was described by Dr. Ernest LaPlace, of Philadelphia. As

the varicose veins are aneurismal in character the treatment can rightly be compared to that of aneurism.

Radical measures are usually limited to acupressure, ligature, or excision. The measures employed to cause coagulation are too painful and too limited in the extent of their action.

The long saphena drains the front of the leg and the circumference of the thigh, and the short saphena drains the posterior surface of the leg. The author's method is to ligate both veins, the long saphena at the saphenous opening and the short one just below the popliteal space. Elevation of the limb and rest in bed for a fortnight is the after-treatment. The author has done the operation seventeen times with perfect success, with the exception of one case in which there was an anomalous position of the long saphenous.

The advantages of the operation are that it can control very extensive varicose veins, that it can be done easily with cocaine, and that no relapses have occurred.

ALVAREZ (*Pacific Med. Jour.*) attributes the rapid decline of the Hawaiian population to the native priest-doctors, syphilis and other native contagious affections whose spread is favored by the habits of the natives, and to the ignorance of the women concerning the management of infancy.

THAYER (*Pacific Med. Jour.*) recommends the direct rays of the sun as a cautery. It is safely applied, the ensuing irritation is slight, the pain subsides as soon as the lens is removed and there is a special curative action. He does not blister, but continues till the tissue is carbonized. The method is suited to the removal of nævi; superficial growths, etc.

PUERPERAL ECLAMPSIA.

AT the Boston Lying-in Hospital, ether is used at first, to control the attack. Chloral hydrate by rectum, is given as a nerve sedative in the intervals. The skin is stimulated by heat, moist or dry, variously applied. Pilocarpine, gr. $\frac{1}{8}$, is given, with brandy or other stimulants. If the skin acts insuff-

ficiently, elaterium or croton oil is given, and enemas. When conscious, milk and brandy are given, and cream of tartar water freely, with a little digitalis, as diuretics. If unable to swallow, brandy, digitalis or nitro-glycerine are given hypodermically. Manual dilatation is preferred, with incisions of the cervix if necessary, version rather than forceps; and care is taken to avoid chilling during delivery.—Green, *Am. Jour. Obstetrics*.

IN THE report of Yale Observatory there is a note concerning clinical thermometers that deserves attention. Of the thermometers sent for verification, from 25 to 75 per cent. are rejected. When instruments are not sent, the workmen take less pains with them, and hence the proportion of defective instruments is greater than among those submitted for examination. Self-registering instruments that have once displaced the index are unreliable thereafter, as the air bubble is not necessarily as large as at first, and hence require retesting.

THE MORRHUOLINES, OR ALKALOIDS OF COD LIVER OIL.—The most important active principles of the oil are the alkaloids, discovered in 1889 by M. Armand Gautier (Professeur à la Faculté de Médecine de Paris) and one of his students, M. L. Mourgues, (Professeur à Santiago de Chili).

Further investigations made by M. Gautier in 1891 and 1892 on chemical and physiological lines, show that the principal bases of Cod Liver Oil are:—

Amylamine,	$C_5H_{13}N$
Dihydrolutidine . . .	$C_7H_{11}N$
Oxycollidine,	$C_8H_{11}NO$
Morrhaine,	$C_{19}H_{27}N_3$
Nicomorrhaine, . . .	$C_{20}H_{28}N_4$
Aselline,	$C_{25}H_{32}N_4$
Morrhuaic Acid, . . .	$C_9H_{13}NO_3$

the last of these, while having the properties of an acid, is, at the same time, slightly basic

The most abundant and most active of these principles are amylamine, oxycollidine, morrhaine and nicomorrhaine.

These alkaloids have all a somewhat similar action on the economy; in small doses they excite the activity of the nervous system and the intra-oxidization

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processes, they assist the digestive functions, stimulate assimilation and circulation, and purify the system of its impurities as is indicated by the enormous quantities of urine excreted under their influence, the acceleration of the sudoral secretions and the increased appetite provoked.

Cod liver oil has always been known to produce these phenomena, but the experiments of M. M. Gautier and Mourgues, Laborde, Boillot, etc., on animals and on man, have established without doubt that these effects are especially due to the presence of the alkaloids of this oil. The value of this popular drug as a medicament therefore is fully confirmed and scientifically explained.

The discovery of these alkaloids has now passed the preliminary stage of laboratory experiment and in our laboratories at Neuilly, we have been able, by modifying and completing the indications laid down of M. Gautier & Mourgues, to extract them on an industrial scale, in a perfectly pure condition, as well as the principle salts of these bases. The following are exhibited for the first time:

AMYLAMINE.—(*Special to Cod Liver Oil*)

Free base $C_5H_{13}N$
Hydrochlorate, $(C_5H_{13}N)HCl$
Hydrobromate, $(C_5H_{13}N)HBr$
Bitartrate, $(C_5H_{13}N)C_4H_6O_6$

DIHYDROLUTIDINE.—

Free base, $C_7H_{11}N$
Bitartrate, $(C_7H_{11}N)C_4H_6O_6$

OXYCOLLIDINE.—

Free base, $C_8H_{11}NO$
Hydrochlorate, $(C_8H_{11}NO)HCl$

NICOMORRHUINE.—

Free Base, $C_{20}H_{28}N_4$
Hydrochlorate, $(C_{20}H_{28}N_4)_2HCl$

MORRHUINE.— $C_{19}H_{27}N_3$

The observations and experiments made on man and animals, show that in view of their great activity, the salts of these alkaloids given hypodermically or by the stomach should not be administered to an adult human being in doses exceeding five to twenty centigrammes daily.

Morrhual, is an alcoholic extract of cod liver oil, which contains *all these alkaloids* and other useful principles essential to the complete therapeutical effects of the oil.

News and Miscellany.

A RARE OPPORTUNITY.

WE are surprised that none of the bright and enterprising readers of this journal have yet secured the Monte Vista property, recently offered for sale in one of our special numbers. This beautiful gem of the Sierra Nevadas is situated one-fourth of a mile from the Dutch Flat R. R. Station, Placer county California. It has long attracted the attention of tourists and health-seekers; and for the past nine years has opened its doors to guests from the interior and sea-coast cities, seeking recreation and recuperation from the wear and tear of business life. At an elevation of 3500 feet, it is absolutely free from all malaria the temperature seldom falling below the freezing point in the coldest winter, or exceeding 80 degrees in the warmest summer days. The purity and dryness of the air, together with the abounding springs and evergreen forests, unite to make this region the "Sanatorium of the Pacific," particularly for asthmatic and pulmonary troubles, which have never been known to develop in natives of this belt. The grandeur of the mountain scenery is here unsurpassed.

Nature, in this home-like tract of orchard, lawn, woodland, fine springs and running streams, has been most lavish; while verandas, mirror lakes embowered in trees, open pavillions, fountains and charming scenery, invite to out-door life. The balmy air of the upper "Sierras" has longed been proved to be the very "Elixir of Life," to scores of debilitated sufferers. For a physician seeking a location in California, this is an unusual opportunity to secure a business of the most attractive nature already established. The present owner, Mrs. C. E. Kinney, is advanced in years and wishes to retire.

NEW INSTRUMENTS.

SIM'S SPECULUM MODIFIED BY DR. P. R. SCHMUCKER, OF READING, PA.

THIS simple device consists of a weight attachment, the upper ends of which are so bent as to fit easily in two perforations near the end of the blades of Sims' Speculum. In operations on the uterus,

many gynæcologists now prefer to use Sims' Speculum with the patients in dorsal or lithotomy position. To hold the old-style speculum in place requires the aid of an assistant, whose position is necessarily awkward, and whose hand often interferes with the freedom of the operator. This modification of the speculum obviates the necessity of an assistant, and is found to answer a most admirable purpose. The perforations are made in both blades, so that either blade can be used by transferring the weight to the other, the ends of the wires dropping easily into the perforations.

With the patient in proper position on the operating table, the speculum never slips, but makes steady traction in the proper direction. To those who have tried it, this instrument has given most gratifying satisfaction.

ANASTOMOSIS BUTTON.

Is a device by Dr. J. R. Murphy, of Chicago, and is perhaps the most ingenious mechanical device for the purpose. See *Northwestern Practitioner*, November, 1892.

TOURNIQUET HOOK.

Dr. H. Augustus Wilson, of Philadelphia, has devised one of the simplest instruments for the immediate application of the tourniquet. The instrument consists simply of an S shaped wire, to the centre bar of which he attaches a piece of rubber tubing of desirable size, and binds the end over on itself and fastens it by means of a wire or cord; this leaves the other end free, which can be passed around the limb any number of times desired and is fastened by passing this rubber tubing under one end of the S shaped instrument which runs parallel with the centre bar and over this and then in turn under the other bar of the instrument, completely locking it, and forming an absolutely safe tourniquet.

COOK'S INVALID TABLE.

Mr. Cook has devised and patented a very simple and durable table for the use of invalids who are confined to their beds. It consists of an upright arm supported by an adjustable clamp, which can be applied to any bed-rail, large or small; and to this upright steel arm is securely fastened a horizontal steel bar

with a socket end, into which is placed a jointed part to which the table is attached. This jointed part just referred to is made so that it can be turned at an angle in order that the table may be used as a book rest, or it may be turned completely over and through an adjusting part on the clamp, can be turned around when not in use, to the head of the bed, for instance. It is made at a very reasonable cost.

Let Chicagoans read the following description of the Liffey, and take heart of grace: "Can nothing be done to abate the fulsome, foetid, fusty, frowsy, mephitic, woeful, frightful, foulness? During Whit-week visitors gazed upon this unsightly, sickening, ghastly, loathsome, sinister, suffocating slough, and asked me did I call it a river. I answered that it was a vile distortion of nature, a grim and grievous monstrosity—a turbid, rancid, yeasty, rank, purulent contamination—and that it was to me an odious eyesore, a vile, appalling, dire abomination, a pestilence, an envenomed virulence, a Stygian sink of smut, sludge, slime, scum, grime, grease, filth, hell-froth, and peccant humors."

Changes in the Medical Corps of the U. S. Navy for the week ending July 8, 1893:—Assistant Surgeon C. De W. Brownell detached from the U. S. S. "Newark," and granted one month's sick leave. Assistant Surgeon S. G. Evans ordered to the U. S. Receiving ship St. Louis. Pd. Assistant Surgeon C. W. Rush ordered before Retiring Board.

A case in a Glasgow court, quite recently, shows that the canny Scot still retains his belief in the evil eye. One of the witnesses said he believed in witchcraft, because the Apostles mentioned it. *Nota bene.* This is the latter part of the nineteenth century.

The British Medical Journal reports the death of a woman from an overdose of tartaric acid. About three drachms were taken.

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Beef, fresh	2 ozs.		

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Physical Decadence. A vitalizing tonic to the Reproductive System. Especially prostatic troubles and sexual impotency. In Gynaecological practice largely used to promote the growth of the mammae. Removes Ovarian pains, Depression and Melancholy. Energizes the circulation. A diffusable tonic and stimulant. A dessertspoonful when one is exhausted acts as a most excellent restorative, and gives a feeling of rest and relief. A powerful Aphrodisiac.

DOSE—Dessertspoonful three or four times a day.

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McARTHUR'S SYRUP

(SYR: HYPOPHOS: COMP: C. P., McARTHUR.)

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McArthur's Syrup has been used successfully in such cases by physicians. If you wish to know how they have been successful, send for our pamphlet on the use of the Hypophosphites.

Prof. H. L. Byrd said of it: "Restores strength and energy to digestion, builds up tissue, restores tone to the system generally."

McArthur's Syrup contains only the Hypophosphites of Lime and Soda, chemically pure, in solution with pure syrup.

For successful Hypophosphite treatment prescribe thus: Syr. Hypophos. Comp., C. P. McArthur.

Sold only in colorless (there is no discoloration which ought to be hidden) 12 oz. bottles, never in bulk. Price, one dollar.

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